## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

1183-37 REPOIN

											<del></del>	<del></del>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			14 minus 20=		. 0			X\$ 9=		OR	X\$18=	_	
INDEPENDENT CLAIMS			(minus 3 =		* 8			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				ı	TOTAL		OR	TOTAL	770	
	С		MENDED - PART II (Column 2) (Column 3)					SMALL E	NTITY	OR	OTHER SMALL		
		(Column 1)		_		(Column 3)	7 -						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<del></del>	=	1 1	X43=		OR	X86=	_	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		<b>J</b>	+145=		OR	+290=		
TOTAL													
											ADDIT. FEE		
								10011.1 LL		•			
	·	(Column 1)		(Colur		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID	FOR	<del>                                     </del>	┨╏		FEE			FEE	
	Total	*	Minus	**		=	-	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	CLAIM	=	<b>∤                                    </b>	X43=		OR	X86=		
	FIRST PRESE	NIATION OF MC	DETIPLE DEF	CINDEIN	CDAIN	<u>. !-! .</u>	┙╽	+145=		OR	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
	`	CLAIMS	1	HIGH		<u> </u>	7 .	<del></del>	ADDI	l		ADDI-	
NTC	•	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
M		AMENDMENT	<del>                                     </del>	1 710	1011	<del></del>	1 H		1 66			1	
<b>AMENDMENT</b>	Total	*	Minus	**		=	<del></del> ┨╏	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AB4	-	┨ ┃	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM			+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
***	If the "Highest Nu	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											